Docket No.: GLAUKO.005C1



## INFORMATION DISCLOSURE STATEMENT

: Morteza Gharib, et al. et al.

App. No.

10/626,181

Filed

July 24, 2003

For

IMPLANT WITH PRESSURE SENSOR

FOR GLAUCOMA TREATMENT

Examiner

Unknown

Group Art Unit

Unknown

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: United States Patent and Trademark Office, PO Box 1450, Alexandria, VA 22313-1450, on

November 21, 2003

(Date)

James W. Hill, M.D., Reg. No. 46,396

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed is form PTO-1449 listing 189 references, 54 references of which are enclosed herewith. Copies of disclosed U.S. patents and/or publications are not included pursuant to PTO waiver of the requirement under 37 C.F.R. § 1.98(a)(2)(i) for applications filed after June 30, 2003. Copies of all other references, if listed, are enclosed.

This Information Disclosure Statement is being filed before the receipt of a first Office Action on the merits, and presumably no fee is required in accordance with 37 C.F.R. § 1.97(b)(3). If a first Office Action on the merits was mailed before the mailing date of this Statement, the Commissioner is authorized to charge the fee set forth in 37 C.F.R. § 1.17(p) to Deposit Account No. 11-1410.

Identification herein is not an admission that any of the foregoing is prior art to the aboveidentified application.

Respectfully submitted,

KNOBBE, MARTENS, OLSON & BEAR, LLP

Dated: November 21, 2003

By:

Registration No. 46,396

Attorney of Record

Attorney of Kecord

Customer No. 20,995

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U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE

ATTY. DOCKET NO. GLAUKO.005C1

APPLICATION NO. 10/626,181

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APPLICANT Morteza Gharib, et al.

FILING DATE July 24, 2003 GROUP ART UNIT

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FORM PTO-1449
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\*EXAMINER: INITIAL IF CITATION CONSIDERED, WHETHER OR NOT CITATION IS IN CONFORMANCE WITH MPEP 609; DRAW LINE THROUGH CITATION IF NOT IN CONFORMANCE AND NOT CONSIDERED, INCLUDE COPY OF THIS FORM WITH NEXT COMMUNICATION TO APPLICANT.

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ATTY.	DOCKET	NO
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